

National Institutes of Health		Note: Use this work request to request cylinder changes, special keying, keys for locks, desks, cabinets, safe work, etc.
KEY/LOCK WORK REQUEST (Use prescribed by Manual 1415)		
FROM (ICD)		DATE
FOR ADDITIONAL INFORMATION CONTACT		PHONE NO.
DELIVER KEY(S) TO		BUILDING AND ROOM
WORK REQUESTED (Describe work, giving building and room number, cylinder changes, rooms to be keyed alike, any numbers on the front of the lock, etc. (Use this section for desk and cabinet keys. For door keys, use lower half of form.)		

Work completed (signature and date)

USE THIS SPACE FOR DOOR KEYS ONLY							
Please make key(s) for room(s) listed below and issue to the following employees. We understand that door keys are not transferrable among employees			THIS SPACE FOR LOCKSMITH USE ONLY				
NAME (last, first, initial)	BLDG	ROOM	HOOK NO.	LOCK NO.	KEY NO.	CODE	KEYWAY
ADMIN. OFFICER'S NAME (typed)			PHONE NO.				
APPROVED BY (Administrative Officer's Signature)			SEND REQUEST TO National Institutes of Health Key Control Unit, Security Branch, Division of Safety Building 31, Room B4 S04 Bethesda, Maryland 20892				